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*Legislative District 47*  
Prince George's County

PRESIDENT PRO TEMPORE

Executive Nominations Committee

Education, Energy and the  
Environment Committee



THE SENATE OF MARYLAND  
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**March 04, 2025**

**The Honorable Pamela G. Beidle**  
**Chairwoman, Senate Finance Committee**  
**3 East Miller Senate Office Building**  
**11 Bladen Street Annapolis, MD 21401**

**RE: SB0790 Maryland Department of Health - Workgroup to Implement Early and  
Periodic Screening, Diagnostic, and Treatment Requirements**

Position: **Favorable With Amendment**

Chair Beidle and Members of the Committee,

**The Problem:**

- In September 2024, the Centers for Medicare and Medicaid Services (CMS) issued a State Health Official letter outlining best practices for states to improve Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) compliance.<sup>1</sup> One of the primary recommendations was to eliminate the requirement for a formal behavioral health diagnosis before services are provided. Understanding how to apply this guidance is essential to improving Maryland's Medicaid behavioral health system.
- A key issue is the requirement that children must have a formal behavioral health diagnosis before receiving services. This restriction can delay critical interventions, particularly for children under five, whose symptoms may not fit neatly into diagnostic categories. Without early access to necessary care, children and their families face increased challenges in managing developmental and behavioral health concerns.
- EPSDT benefit is a crucial part of Medicaid, designed to ensure that children and adolescents under 21 receive necessary preventive, dental, mental health, and specialty services.<sup>1</sup> However, despite EPSDT's intent to provide comprehensive care, significant barriers exist in accessing behavioral health services, particularly for young children.

**What SB0790 does:**

- This bill requires the Maryland Department of Health to convene a workgroup of key stakeholders to provide guidance for the potential implementation of CMS’s EPSDT recommendations. The workgroup will bring together:
  - Maryland Department of Health
  - Behavioral health clinicians and pediatric specialists
  - Parents and caregivers of children receiving EPSDT services
  - Child and family advocacy groups
  - Young people with lived experience in the behavioral health system
- By gathering input from those directly affected by Medicaid’s behavioral health policies, the workgroup will help shape an implementation strategy that effectively removes unnecessary barriers to care.

**How SB0790 helps:**

- By implementing a stakeholder-driven approach, this bill ensures that Maryland’s Medicaid program is in a position to be responsive to the needs of children and families. By implementing workgroup suggested outcomes could lead to:
  - Improved access to behavioral health services for young children without requiring a formal diagnosis
  - More timely and effective interventions that support children’s emotional and developmental well-being
  - A family-centered approach that incorporates the perspectives of caregivers and young people
  - Stronger alignment with federal guidance, ensuring compliance with CMS recommendations
- This bill represents a proactive step in strengthening Maryland’s Medicaid program by ensuring that children receive the behavioral health services they need when they need them. Through this stakeholder collaboration, Maryland can develop policies that may foster better health outcomes for its youngest residents.

**In summary, this bill represents a vital step towards better health outcomes for some of our youngest and most vulnerable Marylanders through working with stakeholders to create proposals for long-term solutions.**

**Amendment Description:** Amendment to the bill will utilize an existing workgroup within the Behavioral Health Care Treatment and Access Commission/Behavioral Health Advisory Council to dedicate some sessions on EPSDT to meet the bill’s requirements.

**Chair Beidle and members of the committee, I ask for your favorable report with amendment.**

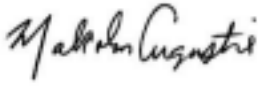
1. Centers for Medicare & Medicaid Services. Best practices for adhering to early and periodic screening, diagnostic, and treatment (EPSDT) requirements. 2024. [https://search.proquest.com/regulatoryinsight/view/app-gis/regulatory-guidance/hhs\\_20240926\\_bestpracticesforadheringtoearlya](https://search.proquest.com/regulatoryinsight/view/app-gis/regulatory-guidance/hhs_20240926_bestpracticesforadheringtoearlya).

In the Senate Finance Committee:

**AMENDMENTS TO Senate BILL 0790**

(First Reading File Bill)

On page 1, in line 10, strike “a workgroup” and insert “the Behavioral Health Care Treatment and Access Commission / Behavioral Health Advisory Council: Youth Behavioral Health, Individuals with Intellectual / Developmental Disabilities, and Individuals with Complex Behavioral Health Needs Workgroup”.



Sincerely, Senator Malcolm Augustine  
President Pro Tempore -- District 47 – Prince George’s County